



FH
[REDACTED]

STATE OF WISCONSIN
Division of Hearings and Appeals

In the Matter of

[REDACTED]
[REDACTED]
[REDACTED]

DECISION

FOO/159218

PRELIMINARY RECITALS

Pursuant to a petition filed July 23, 2014, under Wis. Admin. Code § HA 3.03(1), to review a decision by the Milwaukee Enrollment Services in regard to FoodShare benefits (FS), a hearing was held on August 18, 2014, at Milwaukee, Wisconsin.

The issue for determination is whether Milwaukee Enrollment Services (the agency) issued the correct amount of Replacement Benefits to the Petitioner.

There appeared at that time and place the following persons:

PARTIES IN INTEREST:

Petitioner:

[REDACTED]
[REDACTED]
[REDACTED]

Respondent:

Department of Health Services
1 West Wilson Street, Room 651
Madison, Wisconsin 53703

By: Jose Silvestre, Income Maintenance Specialist Advanced
Milwaukee Enrollment Services
1220 W. Vliet St., Room 106
Milwaukee, WI 53205

ADMINISTRATIVE LAW JUDGE:

Mayumi M. Ishii
Division of Hearings and Appeals

FINDINGS OF FACT

1. Petitioner (CARES # [REDACTED]) is a resident of Milwaukee County.
2. The Petitioner received a FoodStamp disbursement of \$12.00 on June 5, 2014. (Exhibit 3, pgs. 9 and 11)

3. The Petitioner's home experienced a power outage from June 2, 2014 to July 7, 2014. (Exhibit 3, pg. 22; Exhibit 2, pg. 3)
4. On July 11, 2014, the Petitioner filed an application for replacement FoodShare benefits, asserting that she lost \$230 worth of food between June 30, 2014 and July 2, 2014, due to a power outage. (Exhibit 3, pg. 17; Exhibit 2, pg. 2)
5. On that same date, the Petitioner provided a letter from WE energies dated July 7, 2014, indicating that a power outage occurred in her neighborhood between June 30, 2014 and July 2, 2014. (Exhibit 3, pg. 22; Exhibit 2, pg. 3)
6. On July 14, 2014, the Petitioner received her July 2014 FoodShare disbursement, in the amount of \$278.00. (Exhibit 9)
7. On July 21, 2014, the agency sent the Petitioner a notice indicating that it was unable to process her request for replacement benefits because her application was not submitted by a July 10, 2014 deadline. (Exhibit 3, pgs. 9 and 11)
8. The agency subsequently issued to Petitioner an allotment of \$12.00 to replace the food purchased with her benefits in June 2014. (Testimony of [REDACTED] and the Petitioner)
9. The Petitioner filed a request for fair hearing that was received by the Division of Hearings and Appeals on July 23, 2014. (Exhibit 2)

DISCUSSION

The Petitioner filed an appeal because she feels that she should receive replacement benefits in the amount of \$278.00, not the \$12.00 that she received.

According to FoodShare Wisconsin Handbook §7.1.1.5, a state agency may replace food that was purchased with Foodshare benefits and destroyed in a household misfortune "up to the actual amount destroyed, but not more than the monthly allotment actually issued to the household, whichever is less." *Emphasis added.*

In June 2014, the Petitioner was only receiving an allotment of \$12.00. As such, per FSH Sec. 7.1.1.5, the agency may not issue a larger amount in replacement benefits to Petitioner.

CONCLUSIONS OF LAW

The agency correctly issued replacement FoodShare benefits in the amount of \$12.00 to the Petitioner.

THEREFORE, it is

ORDERED

That the petition is dismissed.

REQUEST FOR A REHEARING

This is a final administrative decision. If you think this decision is based on a serious mistake in the facts or the law, you may request a rehearing. You may also ask for a rehearing if you have found new evidence which would change the decision. Your request must explain what mistake the Administrative Law Judge made and why it is important or you must describe your new evidence and tell why you did not have it at your first hearing. If you do not explain these things, your request will have to be denied.

To ask for a rehearing, send a written request to the Division of Hearings and Appeals, P.O. Box 7875, Madison, WI 53707-7875. Send a copy of your request to the other people named in this decision as

"PARTIES IN INTEREST." Your request for a rehearing must be received no later than 20 days after the date of the decision. Late requests cannot be granted.

The process for asking for a rehearing is in Wis. Stat. § 227.49. A copy of the statutes can be found at your local library or courthouse.

APPEAL TO COURT

You may also appeal this decision to Circuit Court in the county where you live. Appeals must be served and filed with the appropriate court no more than 30 days after the date of this hearing decision (or 30 days after a denial of rehearing, if you ask for one).

For purposes of appeal to circuit court, the Respondent in this matter is the Department of Health Services. After filing the appeal with the appropriate court, it must be served on the Secretary of that Department, either personally or by certified mail. The address of the Department is: 1 West Wilson Street, Room 651, Madison, Wisconsin 53703. A copy should also be sent to the Division of Hearings and Appeals, 5005 University Avenue, Suite 201, Madison, WI 53705-5400.

The appeal must also be served on the other "PARTIES IN INTEREST" named in this decision. The process for appeals to the Circuit Court is in Wis. Stat. §§ 227.52 and 227.53.

Given under my hand at the City of Milwaukee,
Wisconsin, this 15th day of September, 2014.

\sMayumi M. Ishii
Administrative Law Judge
Division of Hearings and Appeals



State of Wisconsin\DIVISION OF HEARINGS AND APPEALS

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The preceding decision was sent to the following parties on September 15, 2014.

Milwaukee Enrollment Services
Division of Health Care Access and Accountability